## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

388/2/01

CLAIMS AS FILED - PART I (Column 1) (Column 2						mn 2)		SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			35					RATE	FEE	7	RATE	FEE
FC	DR		NUMBER FILED		NUMBER EXTRĄ			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			35 minus 20=		* 15			X\$ 9=	135	OR	X\$18=	
	DEPENDENT C		<del></del>	nus 3 =	<i>'</i>			X43=	17 2	OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT					·			+145=	ľ	OR	+290=	
* If the difference in column 1 is less than zero, en					"0" in c	olumn 2	•	TOTAL	892	OR	TOTAL	
CLAIMS AS AMENDED - PART (Column 1) (Column						(Column 3)	_	SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER JUSLY .	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus			=		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
								TOTAL ODIT, FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	CI AINA	= '	$\prod$	X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
								TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE	•
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	<u> </u>	=		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	•
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										TOTAL ODIT. FEE	
		mber Previously Pa ber Previously Paid					er foun	d in the app	ropriate box	in colu	ımn 1.	